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FE5AN018

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

12 FEB -3 AM 10: 01

| 1. NAME OF COMMITTEE (in full) | TYPE OR PRINT | ▼ | Example: If typing over the lines. | , type 1 | 2FE4M5 | |
|--|--|---------------------|------------------------------------|---------------|--|----------------------------------|
| George LeMieux for US Senate | | | | | | |
| | | 1 1 1 1 | 1 1 1 1 1 | 1 1 1 1 1 | | |
| ADDRESS (number and street) | 2640A Mitcham I | Drive | | | | |
| ▼ ₁ | | | | | | |
| Check if different than previously reported. (ACC) | Tallahassee | | 1 1 1 1 | ـا لـــــ | FL 32308 | |
| 2. FEC IDENTIFICATION N | UMBER ▼ | CITY [*] | <u> </u> | STA | ATE A | ZIP CODE A STATE ▼ DISTRICT |
| C C00494971 | | 3. IS THIS REPOR | | OR [| AMENDED (A) | FL 00 |
| 4. TYPE OF REPORT (Cr. (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly October 15 Quarter January 31 Year-E | Report (Q1) Report (Q2) only Report (Q3) and Report (YE) | Election | POST-Election Rep | port for the: | General (12G) Special (12S) Y Y Y Runoff (30R) | in the State of FL Special (30S) |
| 5. Covering Period 10 / 01 / 2011 through 12 / 31 / 2011 | | | | | | |
| I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. | | | | | | |
| Type or Print Name of Treasurer Abby Dupree | | | | | | |
| Signature of Treasurer Abby Dupree Abby Dupree Abby Dupree Date Date | | | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. | | | | | | |
| Office Use Only | | | | | | EC FORM 3 (Revised 02/2003) |